REQUEST FOR PATENT FEE REFUND					
1 Date of Request: (1)7/05   2 Serial/Patent # 10/5/7584					
3 Please refund the following fee(s):		4 PAI NUM	ER IBER	5 DATE FILED	6 AMOUNT
Filing					\$
Amendment					\$
Extension of Time					\$
Notice of Appeal/Appeal					\$
Petition		, 3,7%			\$
Issue					\$
Cert of Correction/Terminal	Disc.		•		\$ .
Maintenance					\$
Assignment					\$
other bach ger adjustin	ent				\$ 100
		7 TOTAL AMOUNT S 100			\$ 100
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
Overpayment		Credit Deposit A/C #:			
Duplicate Payment		· [14]112-70			
No Fee Due (Explanation):					
11 REFUND REQUESTED BY:  Paralegal					
TYPED/PRINTED NAME: KUY NEWLS (BASHMAL) TITLE: Plechiso					
SIGNATURE: PHONE: (AS)308-9140  EXT 207					
OFFICE: OFFICE					
APPROVED: DATE:					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B